



CY2014 CPT®/HCPCS Updates

Presented by
DHA UBO Program Office Contract Support

28 Jan 2014 0800 – 0900

30 Jan 2014 1400 – 1500

For entry into the webinar, log into: <http://altarum.adobeconnect.com/ubo>.

Enter as a guest with your full name and Service/NCR Medical Directorate affiliation for attendance verification.

Instructions for CEU credit are at the end of this presentation.

View and listen to the webinar through your computer or Web-enabled mobile device. Note: The DHA UBO Program Office is not responsible for and does not reimburse any airtime, data, roaming or other charges for mobile, wireless and any other internet connections and use.

If you need technical assistance with this webinar, contact us at webmeeting@altarum.org.

You may submit a question or request technical assistance at any during a live broadcast time by entering it into the “Question” field of Adobe Connect.

- Overview of 2014 CPT® changes
- CPT® Changes for Evaluation & Management
- CPT® Changes for Surgery
- CPT® Changes for Radiology, Laboratory & Pathology
- CPT® Changes for Medicine
- CPT® Changes in Category II and III Codes
- 2014 HCPCS code changes

- American Medical Association (AMA) updates CPT® codes annually, effective 1 January.
- Centers for Medicare & Medicaid Services (CMS) updates HCPCS codes on a quarterly basis
- MHS updates CPT®/HCPCS codes annually, however generally not loaded into billing systems until 2nd Q FY
 - Deployment in AHLTA, CHCS, CCE forecast to begin the week of 10 February 2014
- MHS Outpatient Itemized Billing (OIB) rates for new 2014 codes not available until mid-year (generally 1 July 2014)
 - Can only bill if there is a DHA UBO rate for a code that is effective on the date of service
 - DHA UBO rates cannot be applied retroactively
 - Can create billing lags and timely filing issues

● New Code

▲ Revised Code

Out-of-Numerical Sequence Code (resequenced code)

+ Add-on Code

⊙ Moderate Sedation

℥ codes for vaccines that are pending FDA approval

words with a ~~strike-through~~ are deleted in 2014

Overview of 2014 Changes

Changes in the Evaluation and Management section include:

- A new subsection, guidelines and four codes for reporting interprofessional telephone/Internet consultations
- Added new codes include two codes (converted from Category III) which describe total body and selective head hypothermia in critically ill neonates
- There are also revisions to the Complex Chronic Care Coordination guidelines and Transitional Care Management Services guidelines

2013 CPT® Description

2014 CPT® Description

• **#+99481** – Total body systemic hypothermia in a critically ill neonate per day

• **#+99482** – Selective head hypothermia in a critically ill neonate per day

2013 CPT® Description	2014 CPT® Description
	● 99446 - Interprofessional telephone/Internet assessment and management service provided by a consultative physician including a verbal and written report to the patient's treating/requesting physician or other qualified health care professional; 5-10 minutes of medical consultative discussion and review
	● 99447 - 11-20 minutes of medical consultative discussion and review
	● 99448 - 21-30 minutes of medical consultative discussion and review
	● 99449 - 31 minutes or more of medical consultative discussion and review
	● +99467 - each additional 30 minutes (list separately in addition to code for primary service)

- There are fewer changes to the radiology section due to changes in the surgery section that now include radiological supervision and interpretation
- Changes were made to the Chemistry, Microbiology, and Surgical Pathology sections
- 10 new codes were added to the Therapeutic Drug Assay listing
- The Molecular Pathology Tier 1 and Tier 2 subsections also include code additions and revisions
- The Special Otorhinolaryngologic Services subsection has new guidelines and 4 new codes which describe the evaluation of speech production, receptive language, and expressive language abilities

- Changes to the Surgery section include: 72 new codes, 79 revisions and 37 deletions
- The Integumentary section includes new codes for breast biopsy with imaging guidance and breast localization device placement with imaging guidance
- Revisions to the Musculoskeletal section include editorial changes to several of the radical resection codes
- Changes in the Cardiovascular section involves the establishment of new procedure codes, which include radiological supervision and interpretation
- There have been extensive changes made to the Digestive section that involves the entire Esophagus/Endoscopy section.
- Changes in the Nervous System section include the addition of eight chemodenervation codes

2013 CPT® Description	2014 CPT® Description
	<ul style="list-style-type: none"> •🎯 10030 – Image-guided fluid collection drainage by catheter (eg, abscess, hematoma, seroma, lymphocele, cyst), soft tissue (eg, extremity, abdominal wall, neck), percutaneous
13150 - Repair, complex, eyelids, nose, ears and/ lips; 1.0 cm or less	13150 - Repair, complex, eyelids, nose, ears and/ lips; 1.0 cm or less
13151 - Repair, complex, eyelids, nose, ears and/or lips; 1.1 cm to 2.5 cm	▲ 13151 – Repair, complex, eyelids, nose, ears and/or lips; 1.1 cm to 2.5cm
13152 - 2.6cm to 7.5cm	▲ 13152 - 2.6cm to 7.5cm
13153 - each additional 5 cm or less (list separately)	+ ▲ 13153 - each additional 5 cm or less (list separately)

2013 CPT® Description	2014 CPT® Description
15777 - Implantation of biologic implant (e.g., acellular dermal matrix) for soft tissue reinforcement (e.g., breast, trunk)	+▲15777 - Implantation of biologic implant (e.g. acellular, dermal matrix) for soft tissue reinforcement (i.e. breast, trunk)

2013 CPT® Description	2014 CPT® Description
	<ul style="list-style-type: none"> • 19081 – Biopsy, breast, with placement of breast localization device(s) (e.g., clip, metallic pellet), when performed, and imaging of the biopsy specimen, when performed, percutaneous; first lesion, including stereotactic guidance
	<ul style="list-style-type: none"> + • 19082 - each additional lesion, including stereotactic guidance (list separately)
	<ul style="list-style-type: none"> • 19083 – Biopsy, breast, with placement of breast localization device(s) (e.g., clip, metallic pellet), when performed, and imaging of the biopsy specimen, when performed, percutaneous; first lesion, including ultrasound guidance

2013 CPT® Description	2014 CPT® Description
	+ • 19084 – each additional lesion, including ultrasound guidance (List separately in addition to code for primary procedure)
	• 19085 – Biopsy, breast, with placement of breast localization device(s) (e.g., clip, metallic pellet), when performed, and imaging of the biopsy specimen, when performed, percutaneous; first lesion, including magnetic resonance guidance
	+ • 19086 – each additional lesion, including magnetic resonance guidance (List separately in addition to code for primary procedure)

2013 CPT® Description	2014 CPT® Description
19102 - Biopsy of breast; percutaneous, needle core, using image guidance	19102 - Biopsy of breast; percutaneous, needle core using, image guidance
19103 - Percutaneous, automated vacuum assisted or rotating biopsy device using image guidance	19103 - Percutaneous, automated vacuum assisted or rotating biopsy device using image guidance

2013 CPT® Description	2014 CPT® Description
	<ul style="list-style-type: none"> • 19281 - Placement of breast localization device(s) (e.g., clip, metallic pellet, wire/needle, radioactive seeds), percutaneous; first lesion, including mammographic guidance
	<ul style="list-style-type: none"> + • 19282 - each additional lesion, including mammographic guidance (list separately)
	<ul style="list-style-type: none"> • 19283 - Placement of breast localization device(s) (e.g., clip, metallic pellet, wire/needle, radioactive seeds), percutaneous; first lesion, including stereotactic guidance
	<ul style="list-style-type: none"> + • 19284 - each additional lesion, including stereotactic guidance (list separately)

2013 CPT® Description	2014 CPT® Description
	<ul style="list-style-type: none"> • 19285 - Placement of breast localization device(s) (e.g., clip, metallic pellet, wire/needle, radioactive seeds), percutaneous; first lesion including ultrasound guidance
	<ul style="list-style-type: none"> + • 19286 - each additional lesion, including ultrasound guidance (list separately in addition to code for primary procedure)
	<ul style="list-style-type: none"> • 19287 - Placement of breast localization device(s) (e.g., clip, metallic pellet, wire/needle, radioactive seeds), percutaneous; first lesion including magnetic resonance guidance
	<ul style="list-style-type: none"> + • 19288 - each additional lesion, including magnetic resonance guidance (list separately in addition to code for primary procedure)

2013 CPT® Description	2014 CPT® Description
19290 - Preoperative placement of needle localization wire, breast;	19290 -Preoperative placement of needle localization wire, breast
19291 - Preoperative placement of needle localization wire, breast; each additional lesion	19291 -Preoperative placement of needle local wire, breast; each additional lesion
19295 - Image guided placement, metallic localization clip, percutaneous, during breast biopsy/aspiration	19295 -Image guided placement, (localization clip), percutaneous, during breast biopsy/aspiration

2013 CPT® Description	2014 CPT® Description
21015 - Radical resection of tumor (e.g., sarcoma), soft tissue of face or scalp; less than 2 cm	▲ 21015 - Radical resection of tumor (e.g., sarcoma), soft tissue of face or scalp; less than 2 cm
21016 - 2 cm or greater	▲ 21016 - 2 cm or greater
21557 - Radical resection of tumor (e.g. malignant neoplasm), soft tissue of neck or anterior thorax, less than 5 cm	▲ 21557 - Radical resection of tumor (e.g. sarcoma), soft tissue of neck or anterior thorax, less than 5 cm
21558 - 5 cm or greater	▲ 21558 - 5 cm or greater

2013 CPT® Description	2014 CPT® Description
21935 - Radical resection of tumor (eg, malignant neoplasm), soft tissue of back or flank; less than 5 cm	▲ 21935 - Radical resection of tumor (e.g. sarcoma), soft tissue of back or flank; less than 5 cm
21936 - 5 cm or greater	▲ 21936 - 5 cm or greater
22904 - Radical resection of tumor (eg, malignant neoplasm), soft tissue of abdominal wall; less than 5 cm	▲ 22904 - Radical resection of tumor (e.g. sarcoma), soft tissue of abdominal wall; less than 5 cm
22905 - 5 cm or greater	▲ 22905 - 5 cm or greater
23077 - Radical resection of tumor (e.g. sarcoma), soft tissue of shoulder area; less than 5 cm	▲ 23077 - Radical resection of tumor (e.g. sarcoma), soft tissue of shoulder area; less than 5 cm

2013 CPT® Description	2014 CPT® Description
23077 - Radical resection of tumor (e.g. sarcoma), soft tissue of shoulder area; less than 5 cm	▲ 23077 - Radical resection of tumor (e.g. sarcoma), soft tissue of shoulder area; less than 5 cm
23078 - 5 cm or greater	▲ 23078 - 5 cm or greater

2013 CPT® Description	2014 CPT® Description
23331 - Removal of foreign body, shoulder, deep (Neer hemiarthroplasty removal)	23331 - Removal of foreign body, shoulder, deep (neer hemiarthroplasty removal)
23332 - Remove foreign body, shoulder; complicated (e.g., total shoulder)	23332 - Remove foreign body, shoulder; complicated (e.g., total shoulder)
	• 23333 - Removal of foreign body, shoulder, subcutaneous deep (subfascial or intramuscular)
	• 23334 - Removal of prosthesis, includes debridement and synovectomy when performed; humeral or glenoid component
	• 23335 – humeral and glenoid components (eg, total shoulder)

2013 CPT® Description	2014 CPT® Description
24077 - Radical resection of tumor (e.g., malignant neoplasm), soft tissue of upper arm or elbow area; less than 5 cm	▲ 24077 - Radical resection of tumor (e.g., sarcoma), soft tissue of upper arm or elbow area; less than 5 cm
24079 - 5 cm or greater	▲ 24079 - 5 cm or greater

2013 CPT® Description	2014 CPT® Description
24160 - Implant removal; elbow joint	▲ 24160 - Removal of prosthesis, includes debridement and synovectomy when performed; humeral and ulnar components
24164 - radial head	▲ 24164 - radial head
25077 - Radical resection of tumor (e.g., malignant neoplasm), soft tissue of forearm and/or wrist area; less than 3 cm	▲ 25077 - Radical resection of tumor (e.g., sarcoma), soft tissue of forearm and/or wrist area; less than 3 cm
25078 - 3 cm or greater	▲ 25078 - 3 cm or greater

2013 CPT® Description	2014 CPT® Description
26117 - radical resection of tumor (e.g, malignant neoplasm), soft tissue of hand or finger, less than 3 cm	▲ 26117 - radical resection of tumor (e.g., sarcoma), soft tissue of hand or finger, less than 3 cm
26118 - 3 cm or greater	▲ 26118 - 3 cm or greater
27049 - Radical resection of tumor (e.g, malignant neoplasm), soft tissue of pelvis and hip area; less than 5 cm	▲ 27049 - Radical resection of tumor (e.g., sarcoma), soft tissue of pelvis and hip area; less than 5 cm
27059 - 5 cm or greater	#▲ 27059 - 5 cm or greater

2013 CPT® Description	2014 CPT® Description
27329 - Radical resection of tumor (e.g, malignant neoplasm), soft tissue of thigh or knee area; less than 5 cm	#▲27329 - Radical resection of tumor (e.g., sarcoma), soft tissue of thigh or knee area; less than 5 cm
27364 - 5 cm or greater	▲27364 - 5 cm or greater
27615 -Radical resection of tumor (e.g, malignant neoplasm), soft tissue of leg or ankle area; less than 5 cm	▲27615 - Radical resection of tumor (e.g., sarcoma), soft tissue of leg or ankle area; less than 5 cm
27616 - 5 cm or greater	▲27616 - 5 cm or greater
28046 - Radical resection of tumor (eg, malignant neoplasm), soft tissue of foot or toe; less than 3 cm	▲28046 - Radical resection of tumor (e.g., sarcoma), soft tissue of foot or toe; less than 3 cm
28047 - 3 cm or greater	▲28047 - 3 cm or greater

2013 CPT® Description	2014 CPT® Description
32201 - Pneumonostomy; with percutaneous drainage of abscess or cyst	32201 -Pneumonostomy; with percutaneous drainage of abscess or cyst

2013 CPT® Description	2014 CPT® Description
33222 – Revision or relocation of skin pocket for pacemaker	☐▲ 33222 - Relocation of skin pocket for pacemaker
33223 – Revision of skin pocket for cardioverter-defibrillator	☐▲ 33223 - Relocation of skin pocket for cardioverter-defibrillator
33282 - Implantation of patient-activated cardiac event recorder	☐▲ 33282 - Implantation of patient-activated cardiac event recorder
33284 - Removal of an implantable, patient-activated cardiac event recorder	☐▲ 33284 - Removal of an implantable, patient-activated cardiac event recorder

2013 CPT® Description	2014 CPT® Description
	<ul style="list-style-type: none"> • 33366 - Transcatheter aortic valve replacement (TAVR/TAVI) with prosthetic valve; transapical exposure (e.g., left thoracotomy)

2013 CPT® Description	2014 CPT® Description
	<ul style="list-style-type: none"> • 34841 - Endovascular repair of visceral aorta (e.g., aneurysm, pseudoaneurysm, dissection, penetrating ulcer, intramural hematoma, or traumatic disruption) by deployment of a fenestrated visceral aortic endograft and all associated radiological supervision and interpretation, including target zone angioplasty, when performed; including one visceral artery endoprosthesis (superior mesenteric, celiac or renal artery)
	<ul style="list-style-type: none"> • 34842 - including two visceral artery endoprostheses (superior mesenteric, celiac and/or renal artery(s))
	<ul style="list-style-type: none"> • 34843 - including three visceral artery endoprostheses (superior mesenteric, celiac and/or renal artery(s))
	<ul style="list-style-type: none"> • 34844 - including four or more visceral artery endoprostheses (superior mesenteric, celiac and/or renal artery(s))

2013 CPT® Description	2014 CPT® Description
	<ul style="list-style-type: none"> • 34845 - Endovascular repair of visceral aorta and infrarenal abdominal aorta (e.g., aneurysm, pseudoaneurysm, dissection, penetrating ulcer, intramural hematoma, or traumatic disruption) with a fenestrated visceral aortic endograft and concomitant unibody or modular infrarenal aortic endograft and all associated radiological supervision and interpretation, including target zone angioplasty, when performed; including one visceral artery endoprosthesis (superior mesenteric, celiac or renal artery)
	<ul style="list-style-type: none"> • 34846 - including two visceral artery endoprostheses (superior mesenteric, celiac and/or renal artery(s))
	<ul style="list-style-type: none"> • 34847 - including three visceral artery endoprostheses (superior mesenteric, celiac and/or renal artery(s))
	<ul style="list-style-type: none"> • 34848 - including four or more visceral artery endoprostheses (superior mesenteric, celiac and/or renal artery(s))

2013 CPT® Description	2014 CPT® Description
37204 - Transcatheter occlusion or embolization (e.g., for tumor destruction, to achieve hemostasis, to occlude a vascular malformation) percutaneous, any method, non-central nervous system, non-head or neck	37204 -Transcatheter occlusion or embolization (e.g., for tumor destruction, to achieve hemostasis, to occlude a vascular malformation) percutaneous, any method, non-central nervous system, non-head or neck
37205 - Transcatheter placement of an intravascular stent(s) (except coronary, carotid, vertebral, iliac, and lower extremity arteries), percutaneous; initial vessel	37205 -Transcatheter placement of an intravascular stent(s) (except coronary, carotid, vertebral, iliac, and lower extremity arteries), percutaneous; initial vessel
37206 - Transcatheter placement of an intravascular stent(s) (except coronary, carotid, vertebral, iliac and lower extremity arteries) percutaneous; each additional vessel	37206 -Transcatheter placement of an intravascular stent (S) (except coronary, carotid, vertebral, iliac and lower extremity arteries) percutaneous; each additional vessel
37207 - Transcatheter placement of an intravascular stent(s) (except coronary, carotid, vertebral, iliac and lower extremity arteries), open; initial vessel	37207 -Transcatheter placement of an intravascular stent (S) (except coronary, carotid, vertebral, iliac and lower extremity arteries), open; initial vessel

2013 CPT® Description	2014 CPT® Description
37208 - Transcatheter placement of an intravascular stent (S) (except coronary, carotid, vertebral, iliac and lower extremity arteries) percutaneous; open, each additional vessel	37208 --Transcatheter placement of an intravascular stent (S) (except coronary, carotid, vertebral, iliac and lower extremity arteries) percutaneous; open, each additional vessel
37210 - Uterine fibroid embolization, percutaneous approach inclusive of vascular access, vessel selection, embolization, and all radiological supervision and interpretation, intraprocedural roadmapping and imaging guidance necessary to complete the procedure	37210 --Uterine fibroid embolization, percutaneous approach inclusive of vascular access, vessel selection, embolization, and all radiological supervision and interpretation, intraprocedural roadmapping and imaging guidance necessary to complete the procedure

2013 CPT® Description	2014 CPT® Description
	<ul style="list-style-type: none"> • 37217 - Transcatheter placement of an intravascular stent(s), intrathoracic common carotid artery or innominate artery by retrograde treatment, via open ipsilateral cervical carotid artery exposure, including angioplasty, when performed and radiological supervision and interpretation
	<ul style="list-style-type: none"> • 37236 - Transcatheter placement of an intravascular stent(s) (except lower extremity, cervical carotid, extracranial vertebral or intrathoracic carotid, intracranial, or coronary), open or percutaneous, including radiological supervision and interpretation and including all angioplasty within the same vessel, when performed; initial artery
	<ul style="list-style-type: none"> • + 37237 - each additional artery

2013 CPT® Description	2014 CPT® Description
	<ul style="list-style-type: none"> • 37238 - Transcatheter placement of an intravascular stent(s), open or percutaneous, including radiological supervision and interpretation and including angioplasty within the same vessel, when performed; initial vein
	<ul style="list-style-type: none"> • +37239 - each additional vein

2013 CPT® Description	2014 CPT® Description
	<ul style="list-style-type: none"> • 37241 - Vascular embolization or occlusion, inclusive of all radiological supervision and interpretation, intraprocedural roadmapping, and imaging guidance necessary to complete the intervention; venous, other than hemorrhage (e.g., congenital or acquired venous malformations, venous and capillary hemangiomas, varices, varicoceles)
	<ul style="list-style-type: none"> • 37242 - arterial, other than hemorrhage or tumor (e.g., congenital or acquired arterial malformations, arteriovenous malformations, arteriovenous fistulas, aneurysms, pseudoaneurysms)
	<ul style="list-style-type: none"> • 37243 - for tumors, organ ischemia, or infarction
	<ul style="list-style-type: none"> • 37244 - for arterial or venous hemorrhage or lymphatic extravasation

2013 CPT® Description	2014 CPT® Description
42802 - Biopsy; hypopharynx	42802 - Biopsy; hypopharynx
	• 43191 - Esophagoscopy, rigid, transoral; diagnostic, including collection of specimen(s) by brushing or washing when performed (separate procedure)
	• 43192 - with directed submucosal injection(s), any substance
	• 43193 - with biopsy, single or multiple
	• 43194 - with removal of foreign body
	• 43195 - with balloon dilation (less than 30 mm diameter)
	• 43196 - with insertion of guide wire followed by dilation over guide wire
	• 43197 - Esophagoscopy, flexible, transoral; diagnostic, including collection of specimen(s) by brushing or washing when performed (separate procedure)
	• 43198 - with biopsy, single or multiple

2013 CPT® Description	2014 CPT® Description
43200 - Esophagoscopy, rigid or flexible; diagnostic, with or without collection of specimen(s) by brushing or washing (separate procedure)	▲ <input type="checkbox"/> 43200 - Esophagoscopy, flexible, transoral; diagnostic, including collection of specimen(s) by brushing or washing when performed (separate procedure)
43201 - with directed submucosal injection(s), any substance	▲ <input type="checkbox"/> 43201 - with directed submucosal injection(s), any substance
43202 - with biopsy, single or multiple	▲ <input type="checkbox"/> 43202 - with biopsy, single or multiple
43204 - with injection sclerosis of esophageal varices	▲ <input type="checkbox"/> 43204 - with injection sclerosis of esophageal varices
43205 - with band ligation of esophageal varices	▲ <input type="checkbox"/> 43205 - with band ligation of esophageal varices
43206 - with optical endomicroscopy	▲ <input type="checkbox"/> 43206 - with optical endomicroscopy

2013 CPT® Description	2014 CPT® Description
43215 - with removal of foreign body	▲ 43215 - with removal of foreign body
43216 - with removal of tumor(s), polyp(s), or other lesion(s) by hot biopsy forceps or bipolar cautery	▲ 43216 - with removal of tumor(s), polyp(s), or other lesion(s) by hot biopsy forceps or bipolar cautery
43217 - with removal of tumor(s), polyp(s), or other lesion(s) by snare technique	▲ 43217 - with removal of tumor(s), polyp(s), or other lesion(s) by snare technique
	• 43211 - with endoscopic mucosal resection
	• 43212 - with placement of endoscopic stent (includes pre- and post-dilation and guide wire passage, when performed)
43220 - with transendoscopic balloon dilation [less than 30 mm diameter}	▲ 43220 - with transendoscopic balloon dilation [less than 30 mm diameter}
	• 43213 - with transendoscopic balloon dilation (less than 30 mm diameter)
	• 43214 - with dilation of esophagus with balloon (30 mm diameter or larger) (includes fluoroscopic guidance, when performed)

2013 CPT® Description	2014 CPT® Description
43226 - with insertion of guide wire followed by passage of dilator(s) over guide wire	▲ <input type="checkbox"/> 43226 - with insertion of guide wire followed by passage of dilator(s) over guide wire
43227 - with control of bleeding, any method	▲ <input type="checkbox"/> 43227 - with control of bleeding, any method
	• <input type="checkbox"/> 43229 - with ablation of tumor(s), polyp(s), or other lesions(s) (includes pre-and post-dilation and guide wire passage, when performed)
43231 - with endoscopic ultrasound examination	▲ <input type="checkbox"/> 43231 - with endoscopic ultrasound examination
43232 - with transendoscopic ultrasound-guided intramural or transmural fine needle aspiration/biopsy(s)	▲ <input type="checkbox"/> 43232 - with transendoscopic ultrasound-guided intramural or transmural fine needle aspiration/biopsy(s)
43235 - Esophagogastroduodenoscopy, flexible, transoral; diagnostic, including collection of specimen(s) by brushing or washing, when performed (separate procedure)	▲ <input type="checkbox"/> 43235 - Esophagogastroduodenoscopy, flexible, transoral; diagnostic, including collection of specimen(s) by brushing or washing, when performed (separate procedure)
43236 - with directed submucosal injection(s), any substance	▲ <input type="checkbox"/> 43236 - with directed submucosal injection(s), any substance

2013 CPT® Description	2014 CPT® Description
43219 - Esophagoscopy, rigid/flexible; with insertion of plastic tube or stent	43219 - Esophagoscopy, rigid/flexible; with insertion of plastic tube or stent
43228 - Esophagoscopy, rigid/flexible; with ablation of tumor(s), polyp(s), or other lesions not amenable to removal by hot biopsy forceps, bipolar cautery or snare techniques	43228 - Esophagoscopy, rigid/flexible; with ablation of tumor(s), polyp(s), or other lesions not amenable to removal by hot biopsy forceps, bipolar cautery or snare techniques
43235 - Esophagogastroduodenoscopy, flexible, transoral; diagnostic, including collection of specimen(s) by brushing or washing, when performed	▲●43235 - Esophagogastroduodenoscopy, flexible, transoral; diagnostic, including collection of specimen(s) by brushing or washing, when performed
43236 - with directed submucosal injection(s), any substance	▲●43236 - with directed submucosal injection(s), any substance
43237 - with endoscopic ultrasound examination limited to the esophagus, stomach or duodenum, and adjacent structures	▲●43237 - with endoscopic ultrasound examination limited to the esophagus, stomach or duodenum, and adjacent structures
43238 - with transendoscopic ultrasound-guided intramural or transmural fine needle aspiration/ biopsy(s), esophagus (includes endoscopic ultrasound examination limited to the esophagus, stomach or duodenum, and adjacent structures)	▲●43238 - with transendoscopic ultrasound-guided intramural or transmural fine needle aspiration/biopsy(s), esophagus (includes endoscopic ultrasound examination limited to the esophagus, stomach or duodenum, and adjacent structures)

2013 CPT® Description	2014 CPT® Description
43240 - with transmural drainage of pseudocyst (includes placement of transmural drainage catheter(s)/stent(s), when performed, and endoscopic ultrasound, when performed	▲ <input type="checkbox"/> 43240 - with transmural drainage of pseudocyst (includes placement of transmural drainage catheter(s)/stent(s), when performed, and endoscopic ultrasound, when performed
43241 - with insertion of intraluminal tube or catheter	▲ <input type="checkbox"/> 43241 - with insertion of intraluminal tube or catheter
43242 - with transendoscopic ultrasound-guided intramural or transmural fine needle aspiration/biopsy(s) (includes endoscopic ultrasound examination of the esophagus, stomach, and either the duodenum or a surgically latered stomach where the jejunum is examined distal to the anastomosis	▲ <input type="checkbox"/> 43242 - with transendoscopic ultrasound-guided intramural or transmural fine needle aspiration/biopsy(s) (includes endoscopic ultrasound examination of the esophagus, stomach, and either the duodenum or a surgically latered stomach where the jejunum is examined distal to the anastomosis)
43243 - with injection sclerosis of esophageal/ gastric varices	▲ <input type="checkbox"/> 43243 - with injection sclerosis of esophageal/ gastric varices
43244 - with band ligation of esophageal/gastric varices	▲ <input type="checkbox"/> 43244 - with band ligation of esophageal/gastric varices

2013 CPT® Description	2014 CPT® Description
43245- with dilation of gastric/duodenal stricture(s) (e.g., balloon, bougie)	▲ <input type="checkbox"/> 43245- with dilation of gastric/duodenal stricture(s) (e.g., balloon, bougie)
43246- with directed placement of percutaneous gastrostomy tube	▲ <input type="checkbox"/> 43246- with directed placement of percutaneous gastrostomy tube
43247- with removal of foreign body	▲ <input type="checkbox"/> 43247- with removal of foreign body
43248- with insertion of guide wire followed by passage of dilator(s) through esophagus over guide wire	▲ <input type="checkbox"/> 43248- with insertion of guide wire followed by passage of dilator(s) through esophagus over guide wire
43249- with transendoscopic balloon dilation of esophagus (less than 30 mm diameter)	▲ <input type="checkbox"/> 43249- with transendoscopic balloon dilation of esophagus (less than 30 mm diameter)
	#• <input type="checkbox"/> 43233- with dilation of esophagus with balloon (30 mm diameter or larger) (includes fluoroscopic guidance, when performed)
43250 – with removal of tumor(s), polyp(s), or other lesion(s) by hot biopsy forceps or bipolar cautery	▲ <input type="checkbox"/> 43250 – with removal of tumor(s), polyp(s), or other lesion(s) by hot biopsy forceps or bipolar cautery

2013 CPT® Description	2014 CPT® Description
43251- with removal of tumor(s), polyp(s), or other lesion(s) by snare technique	▲●43251- with removal of tumor(s), polyp(s), or other lesion(s) by snare technique
43252- with optical endomicroscopy	▲●43252- with optical endomicroscopy
	●●43253 - with transendoscopic ultrasound-guided intramural injection of diagnostic or therapeutic substance(s) (e.g., anesthetic, neurolytic agent) or fiducial marker(s) (includes endoscopic ultrasound examination of the esophagus, stomach, and either the duodenum or a surgical altered stomach where the jejunum is examined distal to the anastomosis)
	●●43254- with endoscopic mucoal resection
43255- with control of bleeding, any method	▲●43255- with control of bleeding, any method
43256 – with transendoscopic stent placement (includes predilation)	43256- with transendoscopic stent placement (includes predilation)

2013 CPT® Description

2014 CPT® Description

43257- with delivery of thermal energy to the muscle of lower esophageal sphincter and/or gastric cardia, for treatment of gastroesophageal reflux disease	▲●43257- with delivery of thermal energy to the muscle of lower esophageal sphincter and/or gastric cardia, for treatment of gastroesophageal reflux disease
43258 -Upper gastrointestinal endoscopy including esophagus, stomach, and either the duodenum and/or jejunum as appropriate; with ablation of tumor(s), polyp(s), or other lesions(s) not amenable to removal by hot biopsy forceps, bipolar cautery or snare technique	43258 - Upper gastrointestinal endoscopy including esophagus, stomach, and either the duodenum and/or jejunum as appropriate; with ablation of tumor(s), polyp(s), or other lesions(s) not amenable to removal by hot biopsy forceps, bipolar cautery or snare technique
43259- with endoscopic ultrasound examination, including the esophagus, stomach, and either the duodenum and/or a surgically altered stomach where the jejunum as appropriate <u>is examined distal to the anastomosis</u>	▲●43259 - with endoscopic ultrasound examination, including the esophagus, stomach, and either the duodenum and/or a surgically altered stomach where the jejunum as appropriate <u>is examined distal to the anastomosis</u>
43260 - Endoscopic retrograde cholangiopancreatography (ERCP); diagnostic including collection of specimen(s) by brushing or washing, when performed	▲●43260 - Endoscopic retrograde cholangiopancreatography (ERCP); diagnostic including collection of specimen(s) by brushing or washing, when performed
43263 - with pressure measurement of sphincter of Oddi	▲●43263 - with pressure measurement of sphincter of Oddi
43264 - with removal of calculi/debris from biliary/ pancreatic duct(s)	▲●43264 - with removal of calculi/debris from biliary/ pancreatic duct(s)

2013 CPT® Description	2014 CPT® Description
43265 - with destruction of calculi, any method (e.g., mechanical, electrohydraulic, lithotripsy)	▲●43265- with destruction of calculi, any method (e.g., mechanical, electrohydraulic, lithotripsy)
43266- with placement of endoscopic stent (includes pre- and post-dilation and guide wire passage, when performed)	• ▲#●43266- with placement of endoscopic stent (includes pre- and post-dilation and guide wire passage, when performed)
43267 - Endoscopic retrograde colangiopancreatography (ERCP); with endoscopic retrograde insertion of nasobiliary or nasopancreatic drainage tube	43267 -Endoscopic retrograde colangiopancreatography (ERCP); with endoscopic retrograde insertion of nasobiliary or nasopancreatic drainage tube
43268 -Endoscopic retrograde colangiopancreatography (ERCP); with endoscopic retrograde insertion tube or stent into bile or pancreatic duct	43268 -Endoscopic retrograde colangiopancreatography (ERCP); with endoscopic retrograde insertion tube or stent into bile or pancreatic duct
43269 - Endoscopic retrograde colangiopancreatography (ERCP); with endoscopic retrograde removal of foreign body and/or change of tube or stent	43269 --Endoscopic retrograde colangiopancreatography (ERCP); with endoscopic retrograde removal of foreign body and/or change of tube or stent
	•#●43270- with ablation of tumor(s), polyp(s), or other lesion(s) (includes pre- and post-dilation and guide wire passage, when performed)
43271 - Endoscopic retrograde colangiopancreatography (ERCP); with endoscopic retrograde balloon dilation of ampulla, biliary and/or pancreatic duct(s)	43271 -Endoscopic retrograde colangiopancreatography (ERCP); with endoscopic retrograde balloon dilation of ampulla, biliary and/or pancreatic duct(s) 43272 with ablation of tumor (s), polyp(s), or other lesion(s) not amenable to removal by hot biopsy forceps, bipolar cautery or snare technique

2013 CPT® Description	2014 CPT® Description
	<ul style="list-style-type: none"> • #43274- with placement of endoscopic stent into biliary or pancreatic duct, including pre-and post-dilation and guide wire passage, when performed, including sphincterotomy, when performed, each stent
	<ul style="list-style-type: none"> • #43275- with removal of foreign body(s) and stent(s) from biliary/pancreatic duct(s)
	<ul style="list-style-type: none"> • #43276- with removal and exchange of stent(s), biliary or pancreatic duct, including pre- and post-dilation and guide wire passage, when performed, including sphincterotomy, when performed, each stent exchanged
	<ul style="list-style-type: none"> • #43277- with trans-endoscopic balloon dilation of biliary/pancreatic duct(s) or of ampulla (sphincteroplasty), including sphincterotomy, when performed, each duct
	<ul style="list-style-type: none"> • #43278- with ablation of tumor(s), polyp(s), or other lesion(s), including pre-and post-dilation and guide wire passage, when performed

2013 CPT® Description	2014 CPT® Description
43273 -Endoscopic cannulation of papilla with direct visualization of pancreatic/common bile duct(s)	▲ +43273 - Endoscopic cannulation of papilla with direct visualization of pancreatic/common bile duct(s)
43456 -Dilation of esophagus, by balloon or dilator, retrograde	43456 -Dilation of esophagus, by balloon or dilator, retrograde
43458 -Dilation of esophagus, with balloon (30 mm diameter or larger) for achalasia	43458 -Dilation of esophagus, with balloon (30 mm diameter or larger) for achalasia
44901 -Incision and drainage of appendiceal abscess; percutaneous	44901 -Incision and drainage of appendiceal abscess; percutaneous
	47011 - For percutaneous drainage of abscess or cyst, 1 or 2 stages
47552 -Biliary endoscopy, percutaneous via T-tube or other tract; diagnostic, with or without collection of specimen(s) by brushing and/or washing (separate procedure)	▲ 47552 - Biliary endoscopy, percutaneous via T-tube or other tract; diagnostic, with collection of specimen(s) by brushing and/or washing, when performed (separate procedure)

2013 CPT® Description	2014 CPT® Description
48511 -External drainage, pseudocyst of pancreas; percutaneous	48511 -External drainage, pseudocyst of pancreas; percutaneous
	• 49405 -Image-guided fluid collection drainage by catheter (e.g. abscess, hematoma, seroma, lymphocele, cyst)p; visceral (e.g. kidney, liver, spleen, lung/mediastinum), percutaneous
49021 -Drainage of peritoneal abscess or localized peritonitis, exclusive of appendiceal abscess; percutaneous	49021 - Drainage of peritoneal abscess or localized peritonitis, exclusive of appendiceal abscess; percutaneous
49041 -Drainage of subdiaphragmatic/subphrenic abscess; percutaneous	49041 - Drainage of subdiaphragmatic/subphrenic abscess; percutaneous
49061 -Drainage of retroperitoneal abscess; percutaneous	49061 - Drainage of retroperitoneal abscess; percutaneous
	• 49406 - peritoneal or retroperitoneal, percutaneous
	• 49407 – peritoneal or retroperitoneal, transvaginal or transrectal

2013 CPT® Description	2014 CPT® Description
50021 -Drainage of perirenal or renal abscess; percutaneous	50021 -Drainage of perirenal or renal abscess; percutaneous
	• #52356 - with lithotripsy including insertion of indwelling ureteral stent (e.g. Gibbons or double-J type)
58823 -Drain of pelvic abscess, transvaginal/transrectal approach,, percutaneous (e.g., ovarian, pericolic)	58823 -Drain of pelvic abscess, transvaginal/transrectal approach,, percutaneous (e.g., ovarian, pericolic)

2013 CPT® Description	2014 CPT® Description
64613 -Chemodernervation of muscle(s); neck muscle(s) (e.g. for spasmodic torticollis spasmodic dysphonia)	64613 -Chemodernervation of muscle(s); neck muscle(s) (e.g. for spasmodic torticollis spasmodic dysphonia)
	64614 - Extremity and/or trunk muscle(s) (e.g., for dystonia cerebral palsy and multiple sclerosis)
	• 64616 -Neck muscle(s), excluding muscles of the larynx, unilateral (e.g., for cervical dystonia, spasmodic torticollis)
	• 64617 -larynx, unilateral, percutaneous (e.g. for spasmodic dysphonia), includes guidance by needle electromyography, when performed)
	• 64642 -Chemodernervation of one extremity; 1-4 muscle(s)
	•+ 64643 - each additional extremity, 1-4 muscle(s)
	• 64644 -Chemodernervation of one extremity 5 or more muscles
	•+ 64645 - each additional extremity, 5 or more muscles

2013 CPT® Description	2014 CPT® Description
	<ul style="list-style-type: none"> • 64646 -Chemodenervation of truck muscle(s); 1-5 muscles
	<ul style="list-style-type: none"> • 64647- 6 or more muscles
▲ 65778 -Placement of amniotic membrane on the ocular surface; without sutures	▲ 65778 - Placement of amniotic membrane on the ocular surface; without sutures

2013 CPT® Description	2014 CPT® Description
65778 - Placement of amniotic membrane on the ocular surface for wound healing; self-retaining	▲ 65778 - Placement of amniotic membrane on the ocular surface; without sutures
65779 - single layer, sutured	▲ 65779 - single layer, sutured
	• 66183 - Insertion of anterior segment aqueous drainage device, without extraocular reservoir, external approach
69210 - removal impacted cerumen requiring instrumentation, unilateral	▲ 69210 - removal impacted cerumen requiring instrumentation, unilateral

2013 CPT® Description	2014 CPT® Description
72040 -Radiologic examination, spine, cervical; 3 views or less	▲ 72040 -Radiologic examination, spine, cervical; 2 or 3 views
75960 -Transcatheter introduction of intravascular stent(s) except coronary, carotid, cerebral, vertebral, iliac and lower extremities, percutaneous &/open, radiological supervision and interpretation, each vessel	75960 -Transcatheter introduction of intravascular stent(s) except coronary, carotid, cerebral, vertebral, iliac and lower extremities, percutaneous &/open, radiological supervision and interpretation, each vessel
77031 -Stereotactic location guidance for breast biopsy or needle placement, (e.g., for wire localization or for injection), each lesion, radiological supervision and interpretation	77031 -Stereotactic location guidance for breast biopsy or needle placement, (e.g., for wire localization or for injection), each lesion, radiological supervision and interpretation
77032 -Mammography guidance for needle placement, breast,(e.g., for wire localization or for injection), each lesion, radiology supervision and interpretation	77032 -Mammography, and placement, breast, each, radiology supervision and interpretation

2013 CPT® Description	2014 CPT® Description
	• +77293 – Respiratory motion management simulation (list separately in addition to code for primary procedure)
77293 - 3-dimensional radiotherapy plan, including dose-volume histograms	# ▲ 77295 – 3-dimensional radiotherapy plan, including dose-volume histograms

2013 CPT® Description	2014 CPT® Description
	• 80155 -Caffeine
	• 80159 -Clozapuine
	• 80169 -Everolimus
	• 80171 -Gabapentin
	• 80175 -Lamatrigrine
	• 80177 -Leveiracetam
	• 80180 -Mycophenolate (Mycophenolic acid)
	• 80183 -Oxcarbazepine
	• 80199 -Tiagabine
	• 80203 -Zonisamide

2013 CPT® Description	2014 CPT® Description
	• #81287 - MGMT (0-6 methylguanin-DNA methyltransferase) e.g., glioblastoma multiforme), methylation analysis
81371 HLA-A, -B, and -DRB1/3/4/5 (e.g., verification typing)	▲ 81371 -HLA-A, -B, and -DRB1 (e.g., verification typing)
81376 - one locus (e.g., HLA-DRB1/3/4/5, -DQB1, -DQA1, -DPB1, or DPA1), each	▲ 81376 - one locus (e.g., HLA-DRB1, -DRB3/4/5, -DQB1, -DQA1, -DPB1, or DPA1), each
81382 -HLA Class II typing , high resolution (i.e., alleles or allele groups); one locus (e.g., HLA-DRB1, -DRB3, -DRB4, -DRB5, -DQB1, -DQA1, -DPB1, or -DPA1), each	▲ 81382 -HLA Class II typing , high resolution (i.e., alleles or allele groups); one locus (e.g., HLA-DRB1, -DRB3/4/5, -DQB1, -DQA1, -DPB1, or -DPA1), each
81400 -Molecular pathology procedure, Level 1 (e.g., identification of single germline variant (e.g., SNP) by techniques such as restriction enzyme digestion or melt curve analysis)	▲ 81400 -Molecular pathology procedure, Level 1 (e.g., identification of single germline variant (e.g., SNP) by techniques such as restriction enzyme digestion or melt curve analysis)
81401 - Molecular pathology procedure, level 2 (e.g., 2-10 SNPs, 1 methylated variant, or 1 somatic variant {typically using nonsequencing target variant analysis}, or detection of a dynamic mutation disorder/triplet repeat)	▲ 81401 - Molecular pathology procedure, level 2 (eg, 2-10 SNPs, 1 methylated variant, or 1 somatic variant {typically using nonsequencing target variant analysis}, or detection of a dynamic mutation disorder/triplet repeat)

2013 CPT® Description	2014 CPT® Description
<p>81402 -Molecular pathology procedure, Level 3 (e.g., >10 SNPs, 2-10 methylated variants, or 2-10 somatic variants (typically using non-sequencing target variant analysis), immunoglobulin and T-cell receptor gene rearrangements, uniparental disomy (UPD)</p>	<p>▲ 81402 -Molecular pathology procedure, Level 3 (e.g., >10 SNPs, 2-10 methylated variants, or 2-10 somatic variants (typically using non-sequencing target variant analysis), immunoglobulin and T-cell receptor gene rearrangements, uniparental disomy (UPD)</p>
<p>81403 -Molecular pathology procedure, Level 4(e.g., analysis of single exon by DNA, sequence, analysis, analysis of >10 amplicons using multiplex PCR in 2 or more independent reactions, mutation scanning or duplication/deletion variants of 2-5 exons)</p>	<p>▲ 81403 -Molecular pathology procedure, Level 4(e.g., analysis of single exon by DNA, sequence, analysis, analysis of >10 amplicons using multiplex PCR in 2 or more independent reactions, mutation scanning or duplication/deletion variants of 2-5 exons)</p>
<p>81404 -Molecular pathology procedure, Level 5 (e.g., analysis of 2-5 exons by DNA sequence analysis, mutation scanning or duplication/deletion variants of 6-10 exons, or characterization of a dynamic mutation disorder/triplet repeat by Southern blot analysis)</p>	<p>▲ 81404 -Molecular pathology procedure, Level 5 (e.g., analysis of 2-5 exons by DNA sequence analysis, mutation scanning or duplication/deletion variants of 6-10 exons, or characterization of a dynamic mutation disorder/triplet repeat by Southern blot analysis)</p>

2013 CPT® Description

81405 -Molecular pathology procedures, Level 6 (e.g., analysis of 6-10 exons by DNA sequence analysis, mutation scanning or duplication/deletion variants of 6-10 exons), regionally targeted cytogenomic array analysis

81406 -Molecular pathology procedure, Level 7 (e.g., analysis of 11-25 exons by DNA sequence analysis, mutation scanning or duplication/deletion variants of 26-50 exons, cytogenomic array analysis for neoplasia)

81407 -Molecular pathology procedure, Level 8 (e.g., analysis of 26-50 exons by DNA sequence analysis, mutation scanning or duplication/deletion variants of >50 exons, sequence analysis of multiple genes on one platform)

2014 CPT® Description

▲ **81406** -Molecular pathology procedure, Level 7 (e.g., analysis of 11-25 exons by DNA sequence analysis, mutation scanning or duplication/deletion variants of 26-50 exons, cytogenomic array analysis for neoplasia)

▲ **81406** -Molecular pathology procedure, Level 7 (e.g., analysis of 11-25 exons by DNA sequence analysis, mutation scanning or duplication/deletion variants of 26-50 exons, cytogenomic array analysis for neoplasia)

▲ **81407** -Molecular pathology procedure, Level 8 (e.g., analysis of 26-50 exons by DNA sequence analysis, mutation scanning or duplication/deletion variants of >50 exons, sequence analysis of multiple genes on one platform)

2013 CPT® Description

81408 -Molecular pathology procedure, Level 9 (e.g., analysis of >50 exons in a single gene by DNA sequence analysis)

2014 CPT® Description

▲ **81408** -Molecular pathology procedure, Level 9 (e.g., analysis of >50 exons in a single gene by DNA sequence analysis)

2013 CPT® Description	2014 CPT® Description
	<ul style="list-style-type: none"> • 81504 – Oncology (tissue of origin), microarray gene expression profilinf of > 2000 genes, utilizing formalin-fixed paraffin0embedded tissue, algorithm reported as tissue similarity scores
	<ul style="list-style-type: none"> • 81507 – Fetal aneuploidy (trisomy 21, 18, and 13) DNA sequence analysis of selected regions using maternal plasma, algorithm reported as a risk score for each trisomy

2013 CPT® Description	2014 CPT® Description
84112 -Placental alpha microglobulin-1 (PAMG-1), cervicovaginal secretion, qualitative	▲ 84112 -Evaluation of cervicovaginal fluid for specific amniotic fluid protein(s) e.g., placental alpha microglobulin-1 (PAMG-1), placental protein 12 (PP12), alpha-fetoprotein), qualitative, each specimen
87498 - Infectious agent detection by nucleic acid (DNA or RNA); enterovirus, reverse transcription and amplified probe technique	▲ 87498 -Infectious agent detection by nucleic acid (DNA or RNA); enterovirus, amplified probe technique, includes reverse transcription when performed.
87521 - hepatitis C, reverse transcription and amplified probe technique	▲ 87521 - hepatitis C, amplified probe technique, includes reverse transcription when performed
87522 - hepatitis C, reverse transcription and quantification	▲ 87522 - hepatitis C, quantification, includes reverse transcription when performed
87535 -HIV-1, reverse transcription and amplified probe technique	▲ 87535 -HIV-1, amplified probe technique, includes reverse transcription when performed

2013 CPT® Description

2014 CPT® Description

87536 -HIV-1, reverse transcription and quantification

▲**87536** -HIV-1, quantification, includes reverse transcription when performed

87538 -HIV-2, reverse transcription and amplified probe technique

▲**87538** -HIV-2, amplified probe technique, includes reverse transcription when performed

87539 - HIV-2, reverse transcription and quantification

▲**87539** - HIV-2, quantification, includes reverse transcription when performed

•**87661** -Trichomonas vaginalis, amplified probe technique

88342 -Immunohistochemistry or immunocytochemistry, each separately identifiable antibody per block, cytologic preparation or hematologic smear; first separately identifiable antibody per slide
Immunohistochemistry (including tissue immunoperoxidase), each antibody

▲**88342** -Immunohistochemistry or immunocytochemistry, each separately identifiable antibody per block, cytologic preparation or hematologic smear; first separately identifiable antibody per slide

•+**88343** - each additional separately identifiable antibody per slide (list separately in addition to code for primary procedure)

2013 CPT® Description	2014 CPT® Description
	<ul style="list-style-type: none"> • # 90673 -Influenza virus vaccine, trivalent, derived from recombinant DNA (RIV3), hemagglutinin (HA) protein only, preservative and antibiotic free, for intramuscular use
	<ul style="list-style-type: none"> • 90685 -Influenza virus vaccine, quadrivalent, split virus, preservative free, when administered to children 6-35 months of age, for intramuscular use
	<ul style="list-style-type: none"> • 90686 -Influenza virus vaccine, quadrivalent, split virus, preservative free, when administered to individuals 3 years of age and older, for intramuscular use
	<ul style="list-style-type: none"> • 90687 -Influenza virus vaccine, quadrivalent, split virus, when administered to children 6-35 months of age, for intramuscular use
	<ul style="list-style-type: none"> • 90688 -Influenza virus vaccine, quadrivalent, split virus, when administered to individuals 3 years of age and older, for intramuscular use

2013 CPT® Description	2014 CPT® Description
91065 – Breath hydrogen test (e.g., for detection of lactase deficiency, fructose intolerance, bacterial overgrowth, or or-cecal gastrointestinal transit)	▲ 91065 -Breath hydrogen or methane test (e.g., for detection of lactase deficiency, fructose intolerance, bacterial overgrowth, or oro-cecal gastrointestinal transit)
92506 -Evaluation speech, language, voice, communication, and/or auditory processing	92506 -Evaluation speech, language, voice, communication, and/or auditory processing
	• 92521 -Evaluation of speech fluency (e.g. stuttering, cluttering)
	• 92522 -Evaluation of speech sound production (e.g., articulation, phonological process, apraxia, dysarthria);
	• 92523 - with evaluation of language comprehension and expression (e.g., receptive and expressive language)
	• 92524 -Behavioral and qualitative analysis of voice and resonance

2013 CPT® Description	2014 CPT® Description
	<ul style="list-style-type: none"> • 93582 -Percutaneous transcatheter closure of patent ductus arteriosus
	<ul style="list-style-type: none"> • 93583 -Percutaneous transcatheter septal reduction therapy (e.g., alcohol septal ablation) including temporary pacemaker insertion when performed)
<p>93653 - Comprehensive electrophysiologic evaluation including insertion and repositioning of multiple electrode catheters with induction or attempted induction of an arrhythmia with right atrial pacing and recording, right ventricular pacing and recording (when necessary) and His recording with intracardiac, catheter ablation of arrhythmogenic focus; with treatment of supraventricular tachycardia by ablation of fast or slow atrioventricular pathway, accessory atrioventricular connection, cavo-tricuspid isthmus or other single atrial focus or source of atrial re-entry</p>	<p>▲ 93653 -Comprehensive electrophysiologic evaluation including insertion and repositioning of multiple electrode catheters with induction or attempted induction of an arrhythmia with right atrial pacing and recording, right ventricular pacing and recording (when necessary) and His recording (when necessary) with intracardiac, catheter ablation of arrhythmogenic focus; with treatment of supraventricular tachycardia by ablation of fast or slow atrioventricular pathway, accessory atrioventricular connection, cavo-tricuspid isthmus or other single atrial focus or source of atrial re-entry</p>

2013 CPT® Description

2014 CPT® Description

93654- with treatment of ventricular tachycardia or focus of ventricular ectopy including intracardiac electrophysiologic 3D mapping, when performed, and left ventricular pacing and recording, when performed

▲ **93654-** with treatment of ventricular tachycardia or focus of ventricular ectopy including intracardiac electrophysiologic 3D mapping, when performed, and left ventricular pacing and recording, when performed

93656 - Comprehensive electrophysiologic evaluation including transseptal catheterizations, insertion and repositioning of multiple electrode catheters with induction or attempted induction of an arrhythmia including left or right atrial pacing and recording, right ventricular pacing/recording when necessary and His bundle recording when necessary with intracardiac catheter ablation of atrial fibrillation by pulmonary vein isolation

▲ **93656** -Comprehensive electrophysiologic evaluation including transseptal catheterizations, insertion and repositioning of multiple electrode catheters with induction or attempted induction of an arrhythmia including left or right atrial pacing and recording, right ventricular pacing/recording (when necessary) and His bundle recording when necessary with intracardiac catheter ablation of atrial fibrillation by pulmonary vein isolation

• **94669** -Mechanical chest wall oscillation to facilitate lung function, per session

• **97610** -Low frequency, non-contact, non-thermal ultrasound, including topical application(s), when performed, wound assessment, and instruction(s) for ongoing care, per day

99170 - Anogenital examination with colposcopic magnification in childhood for suspected trauma

▲ **99170** - Anogenital examination, magnified, in childhood for suspected trauma, including image recording when performed;

2013 CPT® Description	2014 CPT® Description
	<ul style="list-style-type: none"> • 0580F -Multidisciplinary care plan developed or updated (ALS)
	<ul style="list-style-type: none"> • 0581F -Patient transferred directly from anesthetizing location to critical care unit (Peri2)
	<ul style="list-style-type: none"> • 0582F -Patient not transferred directly from anesthetizing location to critical care unit (Peri2)
	<ul style="list-style-type: none"> • 0583F -Transfer of care checklist used (Peri2)
	<ul style="list-style-type: none"> • 0584F -Transfer of care checklist not used (Peri2)

2013 CPT® Description

2014 CPT® Description

	▲ 1040F – DSM IV™ criteria for major depressive disorder documented at the initial evaluation (MDD, MDD ADOL)1
	• 1500F -Symptoms and signs of distal symmetric polyneuropathy, reviewed and documented (DSP)
	• 1501F -Not initial evaluation for condition (DSP)
	• 1502F -Patient queried about pain and pain interferences with function using a valid and reliable instrument (DSP)
	• 1503F -Patient queried about symptoms of respiratory insufficiency (ALS)
	• 1504F -Patient has respiratory insufficiency (ALS)
	• 1505F Patient does not have respiratory insufficiency

2013 CPT® Description	2014 CPT® Description
	<ul style="list-style-type: none"> • 3751F - Electrodiagnostic studies for distal symmetric polyneuropathy conducted (or requested), documented, and reviewed within 6 months of initial evaluation for condition (DSP)
	<ul style="list-style-type: none"> • 3752F -Electrodiagnostic studies for distal symmetric polyneuropathy not conducted (or requested), documented, or reviewed within 6 months of initial evaluation for condition (DSP)
	<ul style="list-style-type: none"> • 3753F -Patient has clear clinical symptoms and signs that are highly suggestive of neuropathy AND cannot be attributed to another condition, AND has an obvious cause for the neuropathy (DSP)
	<ul style="list-style-type: none"> • 3754F -Screening tests for diabetes mellitus reviewed, requested, or ordered (DSP)
	<ul style="list-style-type: none"> • 3755F -Cognitive and behavioral impairment screening performed (ALS)
	<ul style="list-style-type: none"> • 3756F- Patient has pseudobulbar affect, sialorrhea, or ALS-related symptoms (ALS)
	<ul style="list-style-type: none"> • 3757F -Patient does not have

2013 CPT® Description

2014 CPT® Description

- **3758F** – Patient referred for pulmonary function testing or peak cough expiratory flow (ALS)
- **3759F** -Patient screened for dysphagia, weight loss, or impaired nutrition (ALS)
- **3760F** -Patient exhibits dysphagia, weight loss, or impaired nutrition (ALS)
- **3761F** -Patient does not exhibit dysphagia, weight loss, or impaired nutrition (ALS)
- **3762F** -Patient is dysarthric (ALS)
- **3763F** -Patient is not dysarthric (ALS)

2013 CPT® Description	2014 CPT® Description
	• 4540F -Disease modifying pharmacotherapy discussed (ALS)
	• 4541F -Patient offered treatment for pseudobulbar affect, sialorrhea, or ALS-related symptoms (ALS)
	• 4550F - Options for noninvasive respiratory support discussed with patient (ALS)
	• 4551F -Nutritional support offered (ALS)
	• 4552F -Patient offered referral to a speech language pathologist (ALS)"
	• 4553F -Patient offered assistance in planning for end of life issues (ALS)"
	• 4554F -Patient received inhalational anesthetic agent (Peri2)"
	• 4555F -Patient did not receive inhalational anesthetic agent (Peri2)"
	• 4556F -Patient exhibits 3 or more risk factors for post-operative nausea and vomiting (Peri2)"
	• 4557F -Patient does not exhibit 3 or more risk factors for post-operative nausea and vomiting (Peri2)"

2013 CPT® Description	2014 CPT® Description
	<ul style="list-style-type: none"> • 4558F -Patient received at least 2 prophylactic pharmacologic anti-emetic agents of different classes preoperatively and intraoperatively (Peri2)
	<ul style="list-style-type: none"> • 4559F -At least 1 body temperature measurement equal to or greater than 35.5 degrees Celsius (or 95.9 degrees Fahrenheit) recorded within the 30 minutes immediately before or the 15 minutes immediately after anesthesia end time (Peri2)
	<ul style="list-style-type: none"> • 4560F -Antesthesia technique did not involve general or neuraxial anesthesia (Peri2)
	<ul style="list-style-type: none"> • 4561F -Patient has a coronary artery stent (Peri2)
	<ul style="list-style-type: none"> • 4562F - Patient does not have a coronary artery stent (Peri2)
	<ul style="list-style-type: none"> • 4563F - Patient received aspirin within 24 hours prior to anesthesia start time (Peri2)

2013 CPT® Description	2014 CPT® Description
	<ul style="list-style-type: none"> • 9001F-Aortic aneurysm less than 5.0 cm maximum diameter on centerline formatted CT or minor diameter on axial formatted CT (NMA-No Measure Associated)
	<ul style="list-style-type: none"> • 9002F-Aortic aneurysm less than 5.0 – 5.4 cm maximum diameter on centerline formatted CT or minor diameter on axial formatted CT (NMA-No Measure Associated)
	<ul style="list-style-type: none"> • 9003F-Aortic aneurysm less than 5.5 – 5.9 cm maximum diameter on centerline formatted CT or minor diameter on axial formatted CT (NMA-No Measure Associated)
	<ul style="list-style-type: none"> • 9004F-Aortic aneurysm less than 6.0 cm or greater maximum diameter on centerline formatted CT or minor diameter on axial formatted CT (NMA-No Measure Associated)
	<ul style="list-style-type: none"> • 9005F-Asyptomatic carotid stenosis: No history of any transient ischemic attack or stroke in any carotid or vertebrobasilar territory (NMA – No Measure Associated)

2013 CPT® Description	2014 CPT® Description
	<ul style="list-style-type: none"> • 9006F-Symptomatic carotid stenosis: Ipsilateral carotid territory TIA or stroke less than 120 days prior to procedure (NMA-No Measure Associated)
	<ul style="list-style-type: none"> • 9006F-Other carotid stenosis: Ipsilateral TIA or stroke 120 days or greater prior to procedure or any prior contralateral carotid territory or vertebrobasilar TIA or stroke (NMA-No Measure Associated)

2013 CPT® Description

2014 CPT® Description

0078T -Endovascular repair using prosthesis of abdominal aortic aneurysm, pseudoaneurysm for dissection, abdominal aorta involving visceral branches, superior mesenteric, celiac and/or renal artery(s)

~~**0078T** -Endovascular repair using prosthesis of abdominal aortic aneurysm, pseudoaneurysm for dissection, abdominal aorta involving visceral branches, superior mesenteric, celiac and/or renal artery(s)~~

0079T -Placement of visceral extension prosthesis for endovascular repair of abdominal aortic aneurysm involving visceral vessels, each visceral branch

~~**0079T** -Placement of visceral extension prosthesis for endovascular repair of abdominal aortic aneurysm involving visceral vessels, each visceral branch~~

0080T -Endovascular repair using prosthetics of abdominal aorta aneurysm, pseudoaneurysm/dissection abdominal aorta involving visceral vessels, , superior mesenteric, celiac and/or renal artery(s), radiologic supervision and interpretation

~~**0080T** -Endovascular repair using prosthetics of abdominal aorta aneurysm, pseudoaneurysm/dissection abdominal aorta involving visceral vessels, , superior mesenteric, celiac and/or renal artery(s), radiologic supervision and interpretation~~

0081T -Placement o visceral extension prosthesis for endovascular repair of abdominal aortic aneurysm involving visceral vessels, each visceral branch, radiological supervision and interpretation

~~**0081T** -Placement o visceral extension prosthesis for endovascular repair of abdominal aortic aneurysm involving visceral vessels, each visceral branch, radiological supervision and interpretation~~

0124T -Conjunctival incision with posterior extrascleral placement of pharmacological agent (does not include supply of medication)

~~**0124T** -Conjunctival incision with posterior extrascleral placement of pharmacological agent (does not include supply of medication)~~

2013 CPT® Description	2014 CPT® Description
0183T -Low frequency, non-contact, non-thermal ultrasound, including topical allicatin(s), when performed wound assessment, and instruction(s) for ongoing care, per day	0183T -Low frequency, non-contact, non-thermal ultrasound, including topical allicatin(s), when performed wound assessment, and instruction(s) for ongoing care, per day
0185T -Multivariate analysis patient specific finding with quanfiable complex problem assessment, including report	0185T - Multivariate analysis patient specific finding with quanfiable complex problem assessment, including report
0186T – Suprachoroidal delivery of pharmacologic agent (does not include supply of medication)	0186T - Suprachoroidal delivery of pharnacologic agent (does not include supply of medication);
0192T – External approach	0192T - External approach
0260T -Total body system hypo, day, neonate less than ≤ 28 days	0260T -Total body system hypo, day, neonate less than ≤ 28 days
0261T –Selective head hypothermia, per day, in the neonate 28 days of age or younger	0261T -Selective head hypothermia, per day, in the neonate, 28 days of age or younger

0318T – Implantation of catheter delivered prosthetic aortic heart valve, open thoracic approach, (e.g., transapical, other than transaortic);	0318T Implantation of catheter delivered prosthetic aortic heart valve, open thoracic approach, (e.g., transapical, other than transaortic);
	• 0320T – Insertion of subcutaneous defibrillator electrode
	• 0321T - Insertion of subcutaneous implantable defibrillator pulse generator only with existing subcutaneous electrode
	• 0322T – Removal of subcutaneous implantable defibrillator pulse generator only
	• 0323T – Removal of subcutaneous implantable defibrillator pulse generator with replacement of subcutaneous implantable defibrillator pulse generator only
	• 0324T – Removal of subcutaneous defibrillator electrode
	• 0325T – Repositioning of subcutaneous implantable defibrillator electrode and/or pulse generator
	• 0326T - Electrophysiologic evaluation of subcutaneous implantable defibrillator (includes defibrillation threshold evaluation, induction of arrhythmia evaluation of sensing for arrhythmia termination, and programming or reprogramming of sensing or therapeutic parameters

2013 CPT® Description	2014 CPT® Description
	<ul style="list-style-type: none"> • 0327T - Interrogation device evaluation (in person) with analysis, review and report, includes connection, recording and disconnection per patient encounter, implantable subcutaneous lead defibrillator system
	<ul style="list-style-type: none"> • 0328T - Programming device evaluation (in person) with iterative adjustment of the implantable device to test the function of the device and select optimal permanent programmed values with analysis, implantable subcutaneous lead defibrillator system
	<ul style="list-style-type: none"> • 0329T - Monitoring of intraocular pressure for 24 hours or longer, unilateral or bilateral, with interpretation and report
	<ul style="list-style-type: none"> • 0330T - Tear film imaging, unilateral or bilateral, with interpretation and report
	<ul style="list-style-type: none"> • 0331T - Myocardial sympathetic innervation imaging, planar qualitative and quantitative assessment;
	<ul style="list-style-type: none"> • 0332T - with tomographic SPECT

	<ul style="list-style-type: none"> • 0333T - Visual evoked potential, screening of visual acuity, automated
	<ul style="list-style-type: none"> • 0334T - Sacroiliac joint stabilization for arthrodesis, percutaneous or minimally invasive (indirect visualization), includes obtaining and applying autograft or allograft (structural or morselized), when performed, includes image guidance when performed (eg, CT or fluoroscopic)
	<ul style="list-style-type: none"> • 0335T - Extra-osseous subtalar joint implant for talotarsal stabilization
	<ul style="list-style-type: none"> • 0336T - Laparoscopy, surgical, ablation of uterine (fibroid(s), including intraoperative ultrasound guidance and monitoring, radiofrequency

2013 CPT® Description	2014 CPT® Description
	<ul style="list-style-type: none"> • 0337T - Endothelial function assessment, using peripheral vascular response to reactive hyperemia, non-invasive (e.g., brachial artery ultrasound, peripheral artery tonometry), unilateral or bilateral
	<ul style="list-style-type: none"> • 0338T - Transcatheter renal sympathetic denervation, percutaneous approach including arterial puncture, selective catheter placement(s) renal artery(ies), fluoroscopy, contrast Injection (s), intraprocedural roadmapping and and radiological supervision and interpretation, including pressure gradient measurements, flush aortogram and diagnostic renal angiography when performed; unilateral
	<ul style="list-style-type: none"> • 0339T - bilateral

2014 New HCPCS Codes (By Section)

- Medical Surgical Supplies – 4
- Outpatient PPS Codes – 15
- Durable Medical Equipment (DME) – 5
- Procedure and Professional Services – 128
- Drugs Administered Other than Oral Method – 14
- Orthotic – 3
- Temporary Codes – 8
- Private Payer Codes – 1
- Vision Services - 10

Questions?

**Additional questions may
be sent to**

UBO.LearningCenter@altarmc.org

This in-service webinar has been approved by the American Academy of Professional Coders (AAPC) for 1.0 Continuing Education Unit (CEU) credit for DoD personnel (.mil address required). Granting of this approval in no way constitutes endorsement by the AAPC of the program, content or the program sponsor. There is no charge for this credit.

- **Live broadcast webinar (post-test not required)**

- Login prior to the broadcast with your: 1) full name; 2) Service affiliation; and 3) e-mail address
- View the entire broadcast
- After completion of both of the live broadcasts and after attendance records have been verified, a Certificate of Approval including an AAPC Index Number will be sent via e-mail to participants who logged in or e-mailed as required. This may take several business days.

- **Archived webinar (post-test required)**

- View the entire archived webinar (free and available on demand at http://www.tricare.mil/ocfo/mcfs/ubo/learning_center/training.cfm)
- Complete a post-test available *within* the archived webinar
- E-mail answers to UBO.LearningCenter@altarm.org
- If you receive a passing score of at least 70%, we will e-mail MHS personnel with a .mil email address a Certificate of Approval including an AAPC Index Number

- The original Certificate of Approval may not be altered except to add the participant's name and webinar date or the date the archived Webinar was viewed. Certificates should be maintained on file for at least six months beyond your renewal date in the event you are selected for CEU verification by AAPC
- For additional information or questions regarding AAPC CEUs, please contact the AAPC.
- Other organizations, such as American Health Information Management Association (AHIMA), American College of Healthcare Executives (ACHE), and American Association of Healthcare Administrative Managers (AAHAM), may also grant credit for DHA UBO Webinars. Check with the organization directly for qualification and reporting guidance.